DEPARTMENT OF SOCIAL SERVICES

THREAT ASSESSMENT CHECKLIST

State Police Notified: Yes No	Name of Individual Mak	ing Threat:		
Who / What Is At Risk:	mployee: Non-Employee			
Type of Threat:Specific Language, Actions, Gestures, Etc. of Threat: Clear / Immediate Danger: Yes No Motive / Background: Yes No Prior History of Violence / Threats: Yes No Details (If Known): Yes No PLAN OF ACTION: State Police Notified: Yes No Local Police Notified: Yes No Building Security Notified: Yes No	Present Location of Ind	ividual Making Threat:		
Specific Language, Actions, Gestures, Etc. of Threat: Clear / Immediate Danger: Yes No Motive / Background: Yes No Prior History of Violence / Threats: Yes No Details (If Known): Yes No PLAN OF ACTION: State Police Notified: Yes No Building Security Notified: Yes No Building Security Notified: Yes No	Who / What Is At Risk:			
Specific Language, Actions, Gestures, Etc. of Threat: Clear / Immediate Danger: Yes No Motive / Background: Yes No Prior History of Violence / Threats: Yes No Details (If Known): Yes No PLAN OF ACTION: State Police Notified: Yes No Building Security Notified: Yes No Building Security Notified: Yes No				
Specific Language, Actions, Gestures, Etc. of Threat: Clear / Immediate Danger: Yes No Motive / Background: Yes No Prior History of Violence / Threats: Yes No Details (If Known): Yes No PLAN OF ACTION: State Police Notified: Yes No Building Security Notified: Yes No Building Security Notified: Yes No				
Clear / Immediate Danger:YesNo Motive / Background:YesNo Prior History of Violence / Threats:YesNo Details (If Known):				
Clear / Immediate Danger: Yes No Motive / Background: Yes No Prior History of Violence / Threats: Yes No Details (If Known): Yes No PLAN OF ACTION: State Police Notified: Yes No Local Police Notified: Yes No Building Security Notified: Yes No	Specific Language, Acti	ons, Gestures, Etc. of Threat:		
Clear / Immediate Danger:YesNo Motive / Background:				
Motive / Background: Prior History of Violence / Threats: Yes No Details (If Known):				
Motive / Background: Prior History of Violence / Threats: Yes No Details (If Known):				
Prior History of Violence / Threats: Yes No Details (If Known):				
Prior History of Violence / Threats: Yes No Details (If Known):	Motive / Background:			
Prior History of Violence / Threats: Yes No Details (If Known):				
Prior History of Violence / Threats: Yes No Details (If Known):				
PLAN OF ACTION: State Police Notified:Yes No Local Police Notified:Yes No Building Security Notified:Yes No				
PLAN OF ACTION: State Police Notified:Yes No Local Police Notified:Yes No Building Security Notified:Yes No				
PLAN OF ACTION: State Police Notified: Yes No Local Police Notified: Yes No Building Security Notified: Yes No	Prior History of Violence	e / Threats: Yes No		
PLAN OF ACTION: State Police Notified: Yes No Local Police Notified: Yes No Building Security Notified: Yes No	Details (If Known):			
State Police Notified: Yes No Local Police Notified: Yes No Building Security Notified: Yes No				
State Police Notified: Yes No Local Police Notified: Yes No Building Security Notified: Yes No				
State Police Notified: Yes No Local Police Notified: Yes No Building Security Notified: Yes No				
Local Police Notified: Yes No Building Security Notified: Yes No	PLAN OF ACTION:			
Building Security Notified: Yes No	State Police Notified:	Yes No		
	Local Police Notified:	Yes No		
Actions Taken:	Building Security Notifie	ed: Yes No		
Actions Taken:				
Actions Taken:				
	Actions Taken:			

Revised 03/2012

Threat Assessment Team Members (Print name):	
Date:	